## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)  PAGE 1 OF 23  FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼			
۷V	/omen Speak Out PAC		C C00530766
Check if 24-hour report 48-hour report New report Amends report filed on			
	Full Name of Payee Philip Elkins		Date of Public Distribution/Dissemination
	•		12 06 2014
	Mailing Address 227 Lincoln Dr		Amount
ŀ	City State	Zip Code	50.00
	Bossier City LA	71111	Transaction ID : 13f52211-8d25-4cef-8 Date of Disbursement or Obligation
	Purpose of Expenditure Salary	Category/ Type 001	12 / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
1	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	X Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	559837.90	Disbursement For:
	Full Name of Payee		Date of Public Distribution/Dissemination
	Philip Elkins		12 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 227 Lincoln Dr		Amount
-	City State	Zip Code	9.39
	Bossier City LA	71111	Transaction ID : 265e71db-305c-4296-a Date of Disbursement or Obligation
Ì	Purpose of Expenditure Mileage	Category/ Type 002	12 D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ì	Name of Federal Candidate	Support	Office Sought: House District: 00
	Ms. Mary L Landrieu	Oppose	President Senate State: LA
	Calendar Year-To-Date Per Election for Office Sought	559837.90	Disbursement For: ☐ Primary ☐ General 2014 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			
(b) SUBTOTAL of Unitemized Independent Expenditures			
(	(c) TOTAL Independent Expenditures		•
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concer with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
		onically Filed] Date	e 12 08 2014
	Signature		